

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends of McCormick

Full Name (Last, First, Middle Initial)

A. Still, Shawn, , ,

Mailing Address 2850 Simpson Circle

City
NorcrossState
GAZip Code
30071-2824Purpose of Disbursement
Refund of Contribution Erroneously Deposited that is Drawn on Corporate Funds

Candidate Name

010

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	9

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : DG35VH8QHM3NP9JP6J5T

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ward, Debra, , ,Mailing Address 1720 Mars Hill Rd
Ste. 8-185City
KennesawState
GAZip Code
30152Purpose of Disbursement
Contribution Check Deposited In Error - Determined to be drawn on corporate funds

Candidate Name

010

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	9

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : D8A4YZ57EUR8DYNCWAZM

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1500.00

TOTAL This Period (last page this line number only).....▶

3500.00